



# THE DRUG MEDICAL ORGANIZED DELIVERY SYSTEM

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## Health and Human Services Agency

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# THE NUMBERS AND THE NEED



LIVE WELL  
SAN DIEGO




SUD is a major public health and public safety challenge



3 of 4 arrestees tested positive for a substance in SD County



Methamphetamine-related deaths at all-time high



Impacts on families and communities: crime, violence, abuse, neglect.

# MOVING TOWARDS IMPLEMENTATION



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**JUL 2018** COSD implements DMC-ODS

**MAR 2018** HHSA requests BOS approval of intergovernmental contract

**JAN 2018** DHCS approves COSD rates

**OCT 2017** COSD submits DMC-ODS implementation plan

**AUG 2015** CMS approves California DMC-ODS implementation plan

**JAN 2014** Affordable Care Act implemented

**NOV 2010** CMS approves DHCS proposal (1115 Waiver + DMC-ODS component)



- Increase network capacity and offer new services
- Increase local oversight
- Ensure efficient care coordination and linkages



1. Approve and authorize the execution of the Intergovernmental Agreement between COSD and State of CA to accept funding
2. Appropriate funding to HHSA, BHS for salaries and benefits, services and supplies
3. Authorize DPC to enter into negotiations and contacts with:
  - Opioid Treatment Providers (OTP), as single source contracts
  - SUD residential and recovery programs , as single source contracts
  - Other SUD providers, as single source contracts if needed
  - Existing SUD providers to expand services

# KEY SYSTEM IMPROVEMENTS

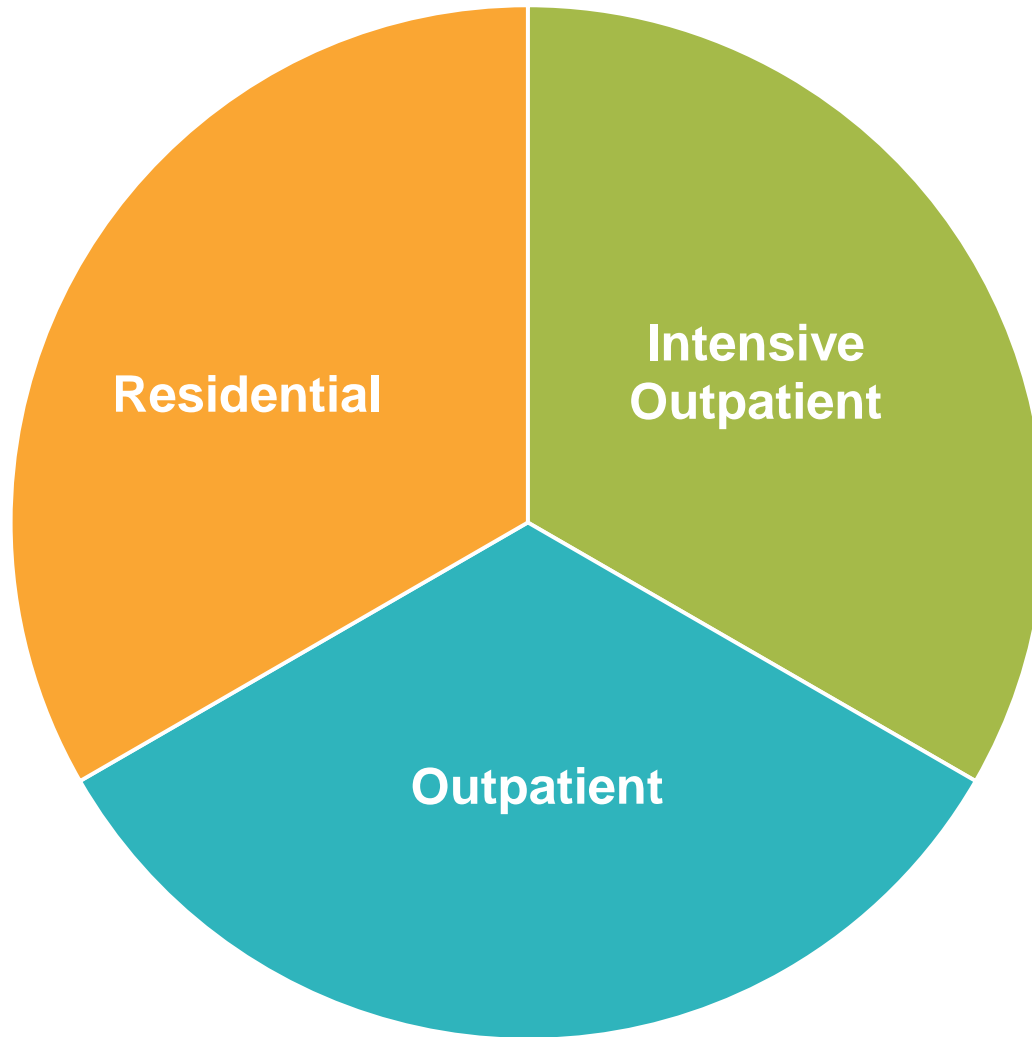


Current System	Future System
Delivery system not organized	Organized, integrated system
Services provided if capacity available	Entitlement; increased access & timely service
Limited quality oversight by counties	Increased quality oversight & accountability
No County oversight or coordination with Opioid Treatment Programs	Direct County contracts & oversight of Opioid Treatment Programs
No placement authorization/monitoring	Centralized placement authorization & monitoring
Limited federal revenue	Increased federal revenue
Low provider rates	Increased provider rates

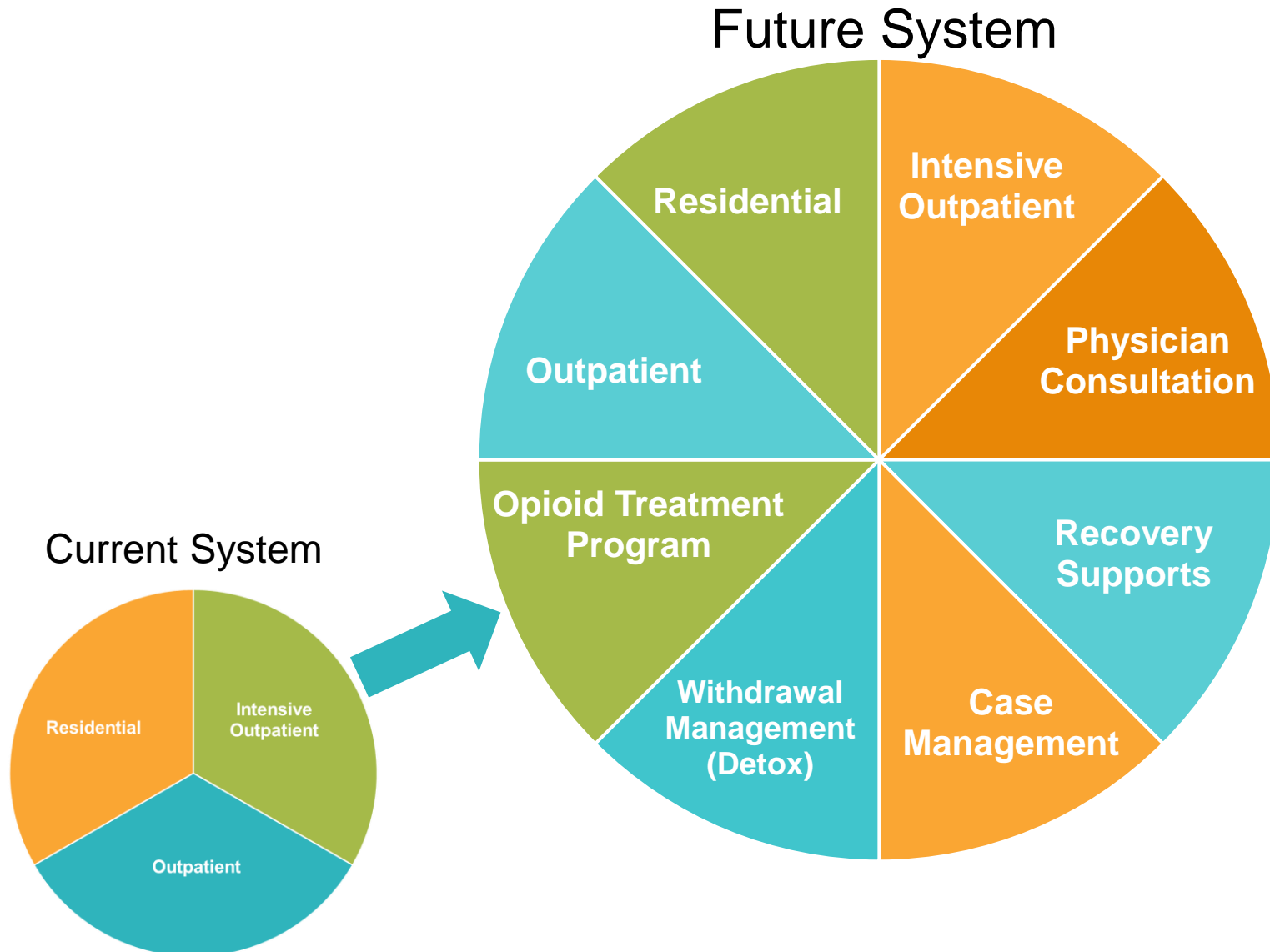
# CURRENT SYSTEM



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SAN DIEGO



# SYSTEM EXPANSION





# OPIOID TREATMENT PROGRAMS



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- Services available
  - Assessment and medical monitoring
  - Integrated care
  - Individual, group and case management services
  - Medication Assisted Treatment
- Evidence-based practice
- System expectations
  - Local oversight
  - Improved care coordination
  - Expansion of available medications
  - Case management and supplementary recovery-related services
  - Length of stay driven by medical necessity (ASAM)

# CRITICAL SUCCESS FACTORS



**Business  
Transformation**



**Clinical  
Transformation**



**Oversight and  
Monitoring**



**Services for  
Justice-Involved  
Population**



- Financial risk – substantial local commitment
- Referrals to treatment not meeting medical necessity
- Provider and system readiness
- Capacity shortfall

# OUTCOMES OF IMPLEMENTATION



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- Timely Access
  - Outpatient appointments within 10 business days
  - Authorizations for residential services within 24 hours
- Reduction in criminal recidivism as measured by a reduction in returns to custody
- Successful and timely (within 10 days) care transitions
- Quality of Life measures
  - Reduction of homelessness
  - Increase in employment and educational activities
  - Social supports
- Alcohol and other drug use

# NEXT STEPS



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- BHAB Action Item – March 1
- Board of Supervisors – March 13
- Authorizations begin – July 1